									Application or Docket Number						
	PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003									10,715.591					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN			
TOTAL CLAIMS			20		ŀ		ŀ	RATE FEE		1	RATE	FEE			
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC I	FEE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			20 minus 20=					X\$ 9=			OR	X\$18=			
INDEPENDENT CLAIMS			3 minus 3 =		•			X43=		OR	X86=				
MI	JLTIPLE DEPE	NDENT CLAIM P	RESENT		•		+145=		OR	+290=					
• #	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTA	L		OR	TOTAL	770			
	CLAIMS AS AMENDED - PART II										•	OTHER			
_	<u>.</u>	(Column 1)		(Colum		(Cotumn 3)		SMAL		ENTITY O		SMALL			
AMENDMENT A	11/06/06	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	BER XUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	-20	Minus	-2	0	-		X\$ 9:			OR	X\$18=			
	Independent	1.3	Minus	<u> </u>		<u> </u>		X43=		••	ОЯ	X86=			
	FIRST PRESE	ENTATION OF ME	JLTIPLE DEI	PENDENT	CLAIM			+145			OR	+290=	•		
920			•					TOT			OR	TOTAL ADDIT, FEE			
	· (Column 1) (Column 2) (Column 3)								EE 8		•	ADDIT. I EE			
AMENOMENT B	21921	CLAIMS REMAINING AFTER		HIGH NUMI PREVIO	BER	PRESENT EXTRA] [RATE		ADDI		RATE	ADDI- TIONAL		
	31701	AMENDMENT		PAID	FOR	2)	┨╏			FEE			FEE,		
	Total	• /	Minus	- 0	<u>30</u>	- 4		X\$ 9=	_		OR	X\$18=			
	Independent	NTATION OF MI	Minus	ENDENT	CLAIM		1 [X43=			OR	X86=			
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			OR	+290=			
									Ŧ		OR	TOTAL ADDIT. FEE			
		(Column 1)		(Colum		(Column 3)				٠.					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PRIEVIO PAID I	BER USLY	PRESENT EXTRA		RATE	1	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		3	l l	X\$ 9=	1		OR	X\$18=			
	Independent	•	Minus	900		8	╽┟	X43=	1			X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ľŀ		+		OR				
A Management of the second and the second of											OR _.	+290=	·		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR	TOTAL ADDIT. FEE	<u>. </u>		
		ther Previously Pak					er faul	nd in the	арр	ropriate box	in col	uma 1.			